

LOUDOUN COUNTY EMS ADVISORY COUNCIL, INC.

ADVANCED LIFE SUPPORT COMMITTEE

MINUTES

Monday, October 20, 2003

The Chairman, Leo C. Kelly, PA called the September meeting of the ALS Committee to order at 1945 hours. The meeting, which was held in Classroom #3 of the Fire-Rescue Training Center, had the following members in attendance:

Co. 3	Alice Love	Co. 14	Jack Merritt
Co. 4	Excused	Co. 15	Fred Gansel
Co. 6	James Downs	Co. 17	Chip Justice
Co. 8	Nicholas Croce	LCFR	Jay Brown, J. Salazar, Jamie Cooper
Co. 9	Kit Fraley	LFAS	Excused
Co. 10	Timothy Boan	LHC	Excused
Co. 12	Karen Deli	Chairman	Leo C. Kelly, PA
Co. 13	Patricia Russell	OMD	Excused
			Loudoun ER John Morgan, MD

Public Comments

None

Minutes

The minutes of the September 2003 meeting were approved with corrections.

Motion by Alice Love Seconded by Fred Gansel

Motion: Approve September 2003 minutes with corrections

Vote: Approved

Medical Director's Report – Dr. Donald Sabella

Dr. Sabella was not available to attend the meeting this evening, however he is available by cell phone if we need him on any issues.

Loudoun Hospital Center Report – Wendy Harvel, RN

Chairman Kelly advised that Wendy Harvel, could not be at the meeting this evening due to work and class commitments, however she did send him an e-mail on several issues from the September 2003, ALS Committee meeting:

1. There is a basic patient charge sheet for EMS Providers currently in the works. It has yet to be approved by Lida Leech, the Manager of the ER. This will be for the replacement items for patients brought to the ER by EMS. Wendy offers many thanks to Bill Nicholson of Company 15, for providing a par list for the ambulances to work from in developing the patient charge sheet.
2. Lida has communicated to Lisa Joyce at the Cornwall Street campus to remind her staff to place the expiration date on the controlled substance pouches when they are replaced EMS.
3. The LHC Pharmacy has been notified of the concerns of EMS regarding the different forms of Diltiazem being provided and also the lack of new expiration dates on the Isuprel in its non-refrigerated state.

Kelly stated, that there appears to be no mechanism to charge for supplies and drugs on patients who are taken to another hospital and/or flown out from the scene of an EMS incident. He stated that they would be meeting with the ER and Hospital Management groups at the end of the month to discuss this situation further. At the present time, it appears that the hospital is accepting this as a loss. Kelly said that he feels that this is unacceptable.

Kelly stated that the hospital has not brought this issue up at this point, however he feels that these losses will only impact on the hospitals ability to expand care and result in higher charges to patients who use the facility to compensate for the loss.

It was also brought to Kelly's attention that the Ativan at the Cornwall campus is not refrigerated. He stated that in an e-mail with Lisa Joyce she confirmed that it was not and that they had no means to refrigerate it. The question that arises is why is the expiration date not been changed to reflect the shortened expiration time due to non-refrigeration? There has been no response to the inquiry at this time.

Kelly said that he also received a communication from an ALS Provider concerning the Pyxis at Cornwall Street. He said that NTG was not being stocked in the Pyxis for replacement and that Toradol was still in the Pyxis despite being removed from the protocols several months ago.

He said that he sent an e-mail to both Lisa Joyce and JoAnn Neufer and that the problem has been corrected.

Alice Love said that while listed on the inventory of the Rescue Pyxis as Sternal IO, the device has not been stocked in the Pyxis for replacement. This will be addressed at the meeting at the end of the month with staff.

A discussion occurred amongst the delegates concerning the replacement practices of the controlled substances and other drugs at Reston, Fair Oaks, Frederick and Winchester Hospitals. They all appear to be different with Winchester and Frederick not replacing the drugs. This requires the drugs to be replaced at Loudoun.

The questions arose again with regard to who should notify the receiving hospital that a patient is enroute to their facility when the receiving facility is other than Loudoun Hospital Center. Kelly stated that it was agreed to several months ago that LHC would be contacting the receiving hospital and providing them with an update of care provided to the patient. Kit Fraley reported that Company 9 had a call during which the patient requested to be taken to Fair Oaks Hospital.

She stated that the providers contact Medical Control at Loudoun Hospital Center in accordance with the protocols to request permission to transfer the patient to Fair Oaks Hospital. The Medical Control physician approved the request, however several blocks from Fair Oaks, they were then advised that Fair Oaks was on reroute and the unit had to turn and around and take the patient to Loudoun. Kelly said that to the best of his knowledge, that the hospital has access to a website that lists the ongoing status of each hospital in regard to reroute status and that should be checked prior to approving the movement of a patient to another facility. This also will be discussed at the meeting in October with staff.

The hospital has purchased new IV start kits. Lida has asked that the stock of the old ones be depleted first by EMS prior to replacing them with the new ones. In order to be effective, the new antiseptic needs to be allowed to dry at the designated IV site prior to the puncture of the skin with the needle.

Working Groups

ALS Protocols

Captain Salazar reported that work continues on the ALS Protocols CD ROM. The release has been delayed by the continuing changes that have occurred. Salazar promised that they would be available as a Holiday present.

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Courses

Captain Salazar stated that due to the cancellation of classes and testing due to Hurricane Isabel in September, the testing has been rescheduled for this weekend on Sunday, October 26, 2003.

The testing will involve the 5 students from the ST to E Transition class and also 4 ALS Challenge students.

The **EMT/E class** now being conducted has a total of 13 students still remaining in the class. One student had to drop out of the class due from personal reasons. The class at the present time is half way through the program and will be doing both EMS and Hospital rotations.

A **PALS Class** was conducted this past weekend with Dr. Trafante of Loudoun ER serving as Course Director. Salazar said that they were disappointed that several individuals from Loudoun Hospital who had signed up for the class failed to report for the class. The class had a total of 8 students – 3 from Loudoun Hospital Center and 5 from Fire-Rescue. Salazar said that despite the poor attendance, the course went very well and that all students were successful in completing the program. The **next PALS Class** is scheduled for **November 22, 23, 2003**, at the Training Center. The announcements of the class have been sent to all the stations.

Captain Salazar reported that **Jamie Cooper** of the EMS Training Division will be **taking over the ALS Programs** and is currently coordinating the EMT/E program.

Jamie Cooper said that he nothing to add on the current EMT/E program reported on by Captain Salazar, however he asked the ALS Committee for their help with this program and also future ALS endeavors.

Cooper brought to the ALS Committee for consideration the names of those individuals who have applied to take the **challenge testing on Sunday, October 26, 2003**. He stated that the Interview Committee had met with all of the perspective candidates and that there did not appear to be any issues. He presented the following names for consideration:

1. Eric Hanna, Co. 15 - Challenging at the ST Level
2. David Dyer, Co. 15 – Currently at ST Level – Challenging at CT/I/P Level
3. Jeremy Adcock, LCFR – Currently at ST Level – Challenging at CT/I/P Level
4. Christine Sylva, LCFR – CT Challenging at CT/I/P Level

A discussion of the challenge candidates and the results of their interviews were discussed.

A motion was made and seconded to approve the candidates for Challenge Testing.

Motion by Jay Brown Seconded by James Downs

Motion: **Approve the following candidates for challenge testing at the listed levels:**

Eric Hanna, Co. 15 - ST Level
David Dyer, Co. 15 - CT/I/P Level
Jeremy Adcock, LCFR – CT/I/P Level
Christine Sylva, LCFR – CT/I/P Level

Vote: **Approved**

A Preceptor Class had been scheduled for October 29, 2003, at the Training Center. The pre-test for the class was scheduled for October 28, 2003. Only 3 applications have been received for the class and they are current ST/E preceptors seeking to advance to CT/I/P preceptors. This means that they only have to be successful with completing the pre-test since they have already attended the class session for preceptor. There were three candidate's names discussed by the committee members for a change to CT/I/P preceptorship status.

A motion was made and seconded to approve the candidates to take the pre-test for CT/I/P preceptorship.

Motion by Jay Brown Seconded by Jack Merritt

Motion: **Approve the following candidates to sit for the CT/I/P Preceptor Pre-test:**

Sean Scott, LCFR – CT/I/P Level Preceptorship
John Grant, LCFR - CT/I/P Level Preceptorship
Rachel Short, LCFR – CT/I/P Level Preceptorship

Vote: **Approved**

A motion was made and seconded to establish a policy on current ALS Preceptors seeking to elevate their status by taking the next level pre-test.

Motion by Jay Brown Seconded by Fred Gansel

Motion: Any current preceptor wishing to advance to the next higher level of preceptorship will be required to take the pre-test for the level of preceptorship they are seeking. If the candidate fails to pass the pre-test for the next higher level, they will be required to not only take the pre-test again but will also be required to sit for the full preceptor class before attaining the new status. (Candidates who pass the pre-test on the first attempt will not be required to sit for the preceptor class. The class that they attended for their current level will suffice)

Vote: Approved

Due to the poor response for the Preceptor Class, Kelly asked that an additional training opportunity be scheduled in November.

Preceptor Class scheduled for November 19, 2003, at the Training Center. Pre-test will be conducted on November 17, 2003. The Candidates names presented to the ALS Committee by November 17, 2003.

Kelly asked the delegates to poll their membership and look for potential candidates for the Preceptor Class and then to encourage them to seek approval of the Chief and apply for the program.

We are working to get a list of the Current Preceptors up on the CAD system and will also look into getting them on the Fire-Rescue Web site.

Fred Gansel stated that based on the recommendation of the individuals Chief, Mentor and a positive review of the precepted calls, he recommended that local authorization be approved at the listed levels for the following ALS Providers:

Mike Behret, CT/I/P Level

Michael Bower, ST/E Level (Requires completion of Mega Code Testing due to extension)

Julius Horvath, ST/E Level (Requires completion of Mega Code Testing due to extension)

Catherine Ippolito, ST/E Level

Michael Nichols, ST/E Level

Daniel Rinehard, ST/E Level

Todd Wenner, ST/E Level

A discussion followed on the number of precepted calls that are considered reasonable for consideration for release.

A motion was made to recommend to the Medical Director the release of the listed ALS Providers.

Motion by Fred Gansel Seconded by Alice Love

Motion: To recommend to the Medical Director the release of the following:

Mike Behret, LCFR as an EMT-CT/P in Loudoun County.

Michael Bower, Co. 6, as an EMT-ST/E (following Mega Code)

Julius Horvath, Co. 6, as an EMT-ST/E (following Mega Code)

Catherine Ippolito, LCFR as an EMT-ST/E

Michael Nichols, LCFR, as an EMT-ST/E

Daniel Rinehard, LCFR, as an EMT-ST/E

Todd Wenner, LCFR, as an EMT-ST/E

Vote: Approved with 1 abstention

Dr. Sabella will need to be contacted on the above for approval.

Fred Gansel also provided an account of those individuals still in preceptorship.

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Old Business

1. No new meetings have been scheduled with Frederick County, Maryland at this point however there appears to have been a decrease in calls since the meeting. Late afternoon calls appear to be slowly on the rise according to Karen Deli.
2. Allie Love stated that there has been no change on the status of the Upperville Fire Department to place an ambulance at their station and the status of their ALS capability.
3. Kit Fraley was asked to have the Chief's Committee make a recommendation for the replacement of the Gator Bag as our ALS bag since it apparently is no longer available. Kit stated that she will be speaking with Sean Hegamyer next week and they will explore alternatives with the Chief's Committee.

New Business

1. It has been suggested that each ALS Station have a controlled substance lock box mounted in a secure area. This would allow that the ALS Providers to place the controlled substances from an ALS unit into this box when a unit is out of service for repairs. Currently, ALS Providers are trying to place them into other boxes making for a tight fit. The Committee agreed and this will be discussed at the EMS Council for approval.
2. The EMS Council will be asked to approve a new key box to be mounted for holding the new size ALS keys.
3. A set of the new ALS Keys was reported missing by an ALS Provider, however prior to filing a report with the Sheriff's Department, the key miraculously reappeared.
4. We need to expand the appropriate notification process and place it into the policies and procedures when discrepancies are noted or when serious protocol violations occur. We will work on this for future expansion.
5. A discussion on problems with the LifPak12 batteries and LifePak500 batteries took place amongst the committee members. Multiple failures of new batteries have occurred throughout the County. This is a serious problem that needs to be addressed by Medtronic Physio Control. It does not appear that the Medtronic Physio Control Tech seems to be taking this as a very serious manner and simply offers the response we will just replace the batteries. Jay Brown will attempt to contact George Buchanan about the situation.
6. Karen Deli stated that Communication is not always notifying her when the Region is uncovered due to the failure of the scheduled technician to sign on. When she questioned the dispatchers on this on occasion, she was advised, "we did not have time to page you". Jay Brown will follow up on this with Communications.

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A brief introduction and discussion occurred with Dr. John Morgan from Loudoun ER. Dr. Morgan was welcomed to Loudoun County as a new ER Physician at Loudoun Hospital. Several concerns and suggestions were discussed with Dr. Morgan.

Kelly thanked Dr. Morgan for his attendance at the meeting this evening and said that he looked forward to working with him in the future.

There being no further business to discuss a motion was made to adjourn the meeting.

Motion by Nick Croce Seconded by Alice Love

Motion: Motion to adjourn the meeting.

Vote: Approved – Meeting Adjourned at 2200 hours

The next ALS Committee meeting will be held on Monday, November 17, 2003, at the Training Center.

For the ALS Committee:

**Leo C. Kelly, PA
Co-Chair – ALS Committee
Loudoun County EMS Council, Inc.**

LCK 10-20-2003